CHECK ONE:	
( ) New Registration	
( ) Quarterly Registration	
( ) Yearly Registration	
( ) Address Change	
( ) Employment Change	
( ) School Change	
( ) Temporary Address	

## Alabama Bureau of Investigation

Form 47	
(Revised June 2011	



## **Sex Offender Registration Form**

Offender Information												
Full Name:		Last		First		Middl		dle		Suffix		
Social Security Number		Birth [	Birth Date		PI	h	Blood Type					
Alternate SSN			Alternate DOB H			Hon	ne/Cell Pho	one	(	Work Phone		
Race		Gender	Hair Color E		ye Color	Color Height		/eight	Skin Tone			
Nearest Relative:		Name		Phone	Nun	nber		Re	Relationship			
Aliases/Nicknames/etc:			Registration Status: ( ) Absco					conded apliant				
Address:		Mailing Address	l					·				
		Street Address (if different	ent)					Apartn	nent #	Time at this residence		
		City		Cou	inty		State		Zip Code			
		Are there any minors livi	ng at this	address	? (Lis	t names/age/	/relationship)	•		•		
		Previous Address						Apartn	nent #			
Other residence (if temporary, include date range) Street												
	City								State Zip Code			
Offend	der:	Checked for warr	ants: Y	( ) N	Outstanding warrants:			Yes (	) No	)( )		
FBI Number:			SID Number:				AIS Numb	er:				
Any Cautions/ Medical Conditions:						Scars/N Tattoos						
Emn	lovi	ment/School Inforr	nation	includi	na d	lav lahor	volunteer	unnaid	intern	shin etc		
Occupation			nation.	Employer			Vorantoor	, ampara		ormp, otor		
Is this employr	ment	within 2,000 ft of a scho	care?		ployer dress:							
Work Locat		: nployer address)										
School Cur Attending:		School Address:										
Other Identifying Information  Driver License/State ID numbers (include issuing State)												
Passport, Military ID, Immigration ID, Professional Licenses, etc.												
Internet Identifiers/Addresses (Email, Facebook, MySpace, Instant Messenger, etc.)												
Offense Information												

Offense:								UCR Code:		
Offense Description:										
Date of Arrest	State Crime	,			Court Case	e #	Disposition Date			
Victim Information:	Age	Race/Gender			Relationship					
Weapon Used:	Туре	Make Descri				Descrip	iption			
Court Information: (Check one in each box)	( ) Out o ( ) Milita ( ) Fede				( ) Pa	Status: ( ) Probation ( ) None ( ( ( (				
Vehicle	e Infor	matior	inc	cluding	land, a	ircraft and v				
(Personal) Type		Mak	Э	Мос	del	Style/Color		Tag # / State		Year
Vehicle Identification	1#	Addre	SS V	vehicle is kept		Plate Category		Plate Type		Year Expires
(Work/Other) Type		Mak	Make Mode			Style/Color		Tag # / \$	State	Year
Vehicle Identification	1#	Address vehicle is kept				Plate Category		Plate T	уре	Year Expires
By signing below, I affirm that all the information I have given is true and correct and is in compliance with Alabama Act Number 2011-640. Failure to accurately complete and return this form could result in a felony conviction.										
Offender SignatureDate										
Responsible Agency Information										
Agency Name Reporting Officer										
Agency Address					NI					
Phone Number Fax Number Email Address										
Officer SignatureDate										

## Law Enforcement Instructions:

After verifying the offender information for accuracy and completeness, enter your agency identifying information and return this form along with a current photograph and fingerprints of the offender to:

Alabama Bureau of Investigation Sex Offender Registry P O Box 1511 Montgomery AL 36102-1511 Office: 334-353-1172 Fax: 334-353-2563